

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Post Issue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: February 24, 2005 Signature: *Marian L. Christopher*

(Marian L. Christopher)

101 087171 Cofc
Docket No.: 220002063600
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Letters Patent of:
Asim DASGUPTA et al.

Patent No.: 6,833,254 B2

Issued: December 21, 2004

For: METHOD TO IDENTIFY IRES ELEMENTS

Certificate
MAR 07 2005
of Correction

REQUEST FOR CERTIFICATE OF CORRECTION
PURSUANT TO 37 CFR 1.323

MS Post Issue
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Upon reviewing the above-identified patent, Patentee noted an omission which should be corrected.

In the Specification:

At column 1, following the first paragraph, Cross-Reference to Related Applications, please insert the following paragraph:

--ACKNOWLEDGMENT OF GOVERNMENT SUPPORT

This invention was made with Government support under Grant No. AI45733, awarded by the National Institutes of Health. The Government has certain rights in this invention.--

03/02/2005 CNGUYEN1 00000065 031952 6833254

01 FC:1811 100.00 DA

sd-245933

MAR 08 2005

The error was found in the application as filed by applicant. Please charge our Deposit Account No. 03-1952 in the amount of \$100.00 covering the fee set forth in 37 CFR 1.20(a).

The error now sought to be corrected is an inadvertent omission of governmental funding, the correction of which does not involve new matter or require reexamination.

Transmitted herewith is a proposed Certificate of Correction effecting such amendment. Patentee respectfully solicits the granting of the requested Certificate of Correction.

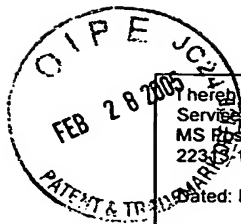
The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 03-1952, under Order No. 220002063600. A duplicate copy of this paper is enclosed.

Dated: February 23, 2005

Respectfully submitted,

By Kate H. Murashige
Kate H. Murashige

Registration No.: 29,959
MORRISON & FOERSTER LLP
3811 Valley Centre Drive, Suite 500
San Diego, California 92130
Telephone: (858) 720-5112
Facsimile: (858) 720-5125



COPY

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MAR 08 2005

**UNITED STATES PATENT AND TRADEMARK OFFICE
CERTIFICATE OF CORRECTION**

PATENT NO. : 6,833,254 *B2*
DATED : December 21, 2004
INVENTOR(S) : Asim DASGUPTA et al.

It is certified that error appears in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

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MAILING ADDRESS OF SENDER:
Kate H. Murashige
MORRISON & FOERSTER LLP
3811 Valley Centre Drive, Suite 500
San Diego, California 92130

PATENT NO. 6,833,254

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PTO/SB/44 (04-04)

Approved for use through 04/30/2007. OMB 0651-0033

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(Also Form PTO-1050)

UNITED STATES PATENT AND TRADEMARK OFFICE
CERTIFICATE OF CORRECTION

PATENT NO. : 6,833,254 *B2*
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INVENTOR(S) : Asim DASGUPTA et al.

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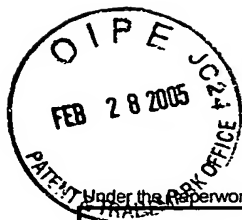
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San Diego, California 92130

PATENT NO. 6,833,254

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MAR 03 2005



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	Patent #: 6,833,254
		Filing Date	Issued: December 21, 2004
		First Named Inventor	Asim DASGUPTA
		Art Unit	1648
		Examiner Name	H. Park
Total Number of Pages in This Submission	9	Attorney Docket Number	220002063600

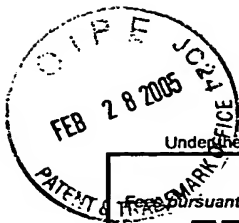
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (1 page + duplicate for fee processing) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Certificate of Correction Pursuant to 37 CFR 1.323 (2 pages + duplicate) Certificate of Correction (1 page + duplicate) Return Receipt Postcard
Remarks Customer No. 25225		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP		
Signature	<i>Kate H. Murashige</i>		
Printed name	Kate H. Murashige		
Date	February 23, 2005	Reg. No.	29,959

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Signature: *Marian L. Christopher* (Marian L. Christopher)



Effective on 12/08/2004. Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	Patent#: 6,833,254
		Filing Date	Issued: December 21, 2004
		First Named Inventor	Asim DASGUPTA
		Examiner Name	H. Park
		Art Unit	1648
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	220002063600
TOTAL AMOUNT OF PAYMENT		(\$)	100.00

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0.00
Provisional	200	100	0	0	0	0	0.00

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**

_____ - = _____ x _____ = 0.00 **Fee (\$)** **Fee Paid (\$)**

_____ 0.00

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

_____ - = _____ x _____ = 0.00

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____ /50 _____ (round up to a whole number) x _____ = _____				<u>0.00</u>

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	<u>0.00</u>
Other: 1811 Certificate of correction	<u>100.00</u>

SUBMITTED BY			
Signature	<u>Kate H. Murashige</u>	Registration No. (Attorney/Agent)	29,959
Name (Print/Type)	Kate H. Murashige	Telephone	(858) 720-5112
		Date	February <u>23</u> , 2005

MAR 08 2005